

**APPLICATION FOR OCCUPANCY**

     **Sale**           **Lease/Rental/Use**           **Gift**

Association \_\_\_\_\_ Fee Required Yes or No - Amt. \$ \_\_\_\_\_

**Application fee payable to Pepitone Properties Corp. Mail fee and application to: Pepitone Properties Corp., 8890 Salrose Lane, Suite 200, Fort Myers, FL. 33912 to process application.**

*Application must be received 14 days prior to Sale Closing, or Start of Lease/Rental Period for board approval if required. A copy of the sales contract, lease or rental agreement, and Verification of Age, MUST be attached. To comply with the Florida Statutes regulating Condominiums with the intention of being a 55 and over condominium, the Board of Directors is required to have on file proof of the age of each resident. In the case of inheritance, the person who inherits a unit may not be approved for occupancy. PLEASE SUBMIT A COPY OF YOUR BIRTH CERTIFICATE, DRIVER'S LICENSE OR OTHER INSTRUMENT PROVING YOUR DATE OF BIRTH. (If Applicable)*

Broker \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Application Date: \_\_\_\_\_ Current Unit Owner \_\_\_\_\_ Unit \_\_\_\_\_

Lease/Rental/Use From: \_\_\_\_\_ To \_\_\_\_\_ Number of persons to Occupy unit \_\_\_\_\_

Full Legal Name(s) of all occupants:

Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Primary Address:

\_\_\_\_\_

Phone# \_\_\_\_\_ Business Ph# \_\_\_\_\_ Fax# \_\_\_\_\_

E-mail \_\_\_\_\_

Retired     Employed By \_\_\_\_\_ How Long \_\_\_\_\_ Phone # \_\_\_\_\_

**Must be specific in order to comply if allowed as to Car /Truck/Motor Home/5th Wheel/Boat, etc: (truck beds may need to be covered if allowed.)**

Type of Vehicle/Make/Color: \_\_\_\_\_ License Plate \_\_\_\_\_

Second Vehicle/Other: \_\_\_\_\_

Emergency Contact & Number: \_\_\_\_\_

Pets: If allowable by Association /Owner: Number \_\_\_\_\_ Type \_\_\_\_\_ Weight of Each \_\_\_\_\_

References: \_\_\_\_\_ Phone# \_\_\_\_\_

I/We have received a copy of the governing documents for the Association and agree to abide by them during our occupancy. The Board may require personal interview.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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**For Board of Directors' Use**

Date: \_\_\_\_\_ Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_

For the Board

For the Board

**CONDO/PUD CERTIFICATION:** Association is under no legal obligation to complete documents, and it is the association's policy to decline to complete forms also of this nature.

1. Questions are legal conclusions.
2. Inappropriate to accept any liability.
3. Information can be obtained through review of various public county records, owner's inspection of official association records per statute and/or should be completed by an attorney.

**UPON CLOSING A COPY OF THE WARRANTY DEED MUST BE FAXED OR MAILED TO OUR OFFICE TO MAINTAIN OWNERSHIP RECORDS.**